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CONFIRMATION NO. 8035

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10/564,315	12/21/2006 RULE	324	3754	Q92546

APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/FR04/01844 07/13/2004

** FOREIGN APPLICATIONS *****

FRANCE 0308833 07/18/2003

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

11/05/2007

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged		/MICHAEL E HAGEDORN/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	ITALY	4	19	1

ADDRESS

SUGHRUE MION, PLLC
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TITLE

Dose Indicator for fluid Product Dispensing Device

FILING FEE RECEIVED 1160	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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